

# TALKING CASEMIX

Volume 3 Issue 1

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**THE NEWSLETTER OF THE NATIONAL ALLIED HEALTH CASEMIX COMMITTEE**  
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## IFI and PI Project – Phase I completed

In September, NAHCC completed the final draft report of the *Indicators for Intervention and Performance Indicators* Project.

This work is an important step in furthering the capacity of Allied Health professionals to quantify the impact of their interventions in all health care settings.

The IFI set provides a common means of grouping patients / clients according to the reason for intervention.

The PI model allows for the structured development of specific Performance Indicators which demonstrate the value of Allied Health activity, yet maintain a patient focus.

The final IFI set is included with this edition of *Talking Casemix*.

The PI Model ties in performance measurement to the Allied Health reason for Intervention (ie the IFI) while maintaining the Commonwealth Department of Health and Aged Care's general structure for performance measurement.

Represented simplistically the PIs arise from a matrix arrangement of the new NAHCC IFIs and the CDHAC eight performance dimensions as follows:

Dimensions of performance	C Level IFI examples			
	IFI 111	IFI 112	through to	IFI 544
Access	•	•	→	•
Efficiency	•	•	→	•
Safety	•	•	→	•
Effectiveness	•	•	→	•
Continuity	•	•	→	•
Technical Proficiency	•	•	→	•
Appropriateness	•	•	→	•
Acceptability	•	•	→	•

The Executive Summary of the IFI-PI Project is planned to be available on the CDHAC website in the near future and NAHCC will distribute copies of the full report to all member associations and state / territory health departments.

Future phases of this research will address the following issues:

- Validation of the C and D Level IFIs
- Extensive data collection using the IFI set in all care delivery settings
- Development of specific Performance Indicators and subsequent collection of data to permit establishment of PI-specific benchmarks.

**For further information about the IFI and PI work please contact your profession representative or the NAHCC Secretariat.**

### HOW TO CONTACT NAHCC

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## **NAHCC EXECUTIVE AND REPRESENTATIVES FOR 2000**

At the NAHCC Annual General Meeting, member associations confirmed their representatives for the coming year.

At the same time four of the eight Executive Committee members stepped down.

In the past year we have welcomed the Australian Association for Exercise and Sports Physiologists and the Commonwealth Department of Health and Aged Care as new NAHCC members.

Please refer to page 4 for a full listing of representatives.

NAHCC representatives have typically met only once or twice a year in person, primarily because of resource constraints.

The Executive has met by teleconference every month and periodically in person.

This coming year, we will be trialing a new approach, where the NAHCC Executive will meet quarterly in different states. This should boost communication between NAHCC and the State and Territory Casemix Committees. The Executive will continue to meet by teleconference at monthly intervals.

Two further opportunities to meet as a national network are the NAHCC workshop to be held in Melbourne this November and the Annual Seminar scheduled for August in Cairns.

Please make use of your association / state representative to bring your issues to NAHCC.

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### **NAHCC CHAIRPERSON**

Annette Byron has stepped down as NAHCC Chair, having completed a very frenetic two-year term. Viv Wulfsohn is NAHCC's new chairperson. Viv represents the Australian Physiotherapy Association and is manager of Physiotherapy Services at Melbourne's Alfred Hospital.

Viv was born in Zimbabwe and completed her physiotherapy degree in Johannesburg, South Africa in 1980. She immigrated to Melbourne and

commenced working as a physiotherapist at The Alfred in 1981.

Viv has worked in a variety of settings including acute, rehabilitation, private practice and early intervention. Her area of clinical specialty was in neurosciences, and she completed a PostGraduate Diploma in Physiotherapy (neurosciences). A new career in management commenced in August 1997 at The Alfred and she is currently completing a PostGraduate Diploma Business Administration (Health Sciences).

Early in 1998 Viv was co-opted on to the 'Physiotherapists in Management' Victorian Special Interest Group. Putting her hand up for the 'Casemix Portfolio' was the start of a deep interest and ... ??passion about casemix issues for allied health and all the implications and ramifications of coding and costing issues.

Viv has a vision for NAHCC becoming an integral part of the government's mechanism for dealing with national allied health issues relating to costing, coding and measurement. There are a number of strategies to achieve this, in the interest of achieving the best situation for allied health services around the country. The state casemix groups also have a wealth of knowledge and expertise in this area which, says Viv, could be harnessed and integrated with NAHCC goals and activities.

Viv would welcome any ideas, suggestions or queries regarding NAHCC, and can be contacted by phone 03 9276 3450, fax 03 9276 2702 or email [V.Wulfsohn@alfred.org.au](mailto:V.Wulfsohn@alfred.org.au)

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### **OT AUSTRALIA AWARD GOES TO NAHCC REP**

The OT Australia Award was presented to Gayle Smith earlier this year, in recognition of her contribution to the association, particularly in the area of casemix.

Gayle is the 1998 recipient of the award which was presented to her at the biennial OT Australia National Conference held last April.

As the Occupational Therapy representative on NAHCC, Gayle has been a working party member for NAHCC's IFI/PI Project.

Gayle is currently on maternity leave from her position as Manager of the Business Development Unit of the Women and Children's Health Care Network (Melbourne), and remains as the OT rep to NAHCC.

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## NAHCC ANNUAL SEMINAR GOES TO CAIRNS

NAHCC held its 1999 two-day seminar, *Allied Health – Managing (for) the Future*, in late August in Darwin immediately after the Eleventh Casemix Conference. By all accounts it was a successful event with over 90 participants and 19 presenters sharing their research, updating their knowledge of casemix and related matters.

The delightful tropical climate was ideal for networking and de-stressing, although some delegates really unwound and took off to explore greater Darwin by motor scooter!

We are maintaining the tropical theme next year with the Seminar to be held in Cairns on August 31<sup>st</sup> and September 1<sup>st</sup>, immediately following the Twelfth Casemix Conference.

A Seminar working group will be established soon. Pre-registration brochures and call for papers will be sent out early in the new year, so pencil the dates in your diary now.

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## ALLIED HEALTH COST WEIGHT WORKSHOP TO BE HELD IN DECEMBER

NAHCC is working with CDHAC to conduct a cost weight workshop in December. Many readers will know that the Allied Health Service Weights used in Australia are based on data sets from the United States. The models of care in the US are substantially different to those in Australia, so NAHCC is particularly interested in exploring possibilities for locally generated data.

The workshop participants will comprise representatives from NAHCC, state and territory health departments, benchmarking groups and other key stakeholders.

A week before NAHCC's workshop takes place, an industry-wide costing workshop will be held in Canberra. There will be ample opportunity for the recommendations arising from the NAHCC workshop to be integrated into the industry-wide outcomes.

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## ICD-10-AM VERSION TWO GOES GENERIC

The National Centre for Classification in Health (NCCH) is currently preparing the 2nd edition of ICD-10-AM for publication. The release date is planned for January 2000, with implementation nationwide in July 2000.

The Allied Health chapter (XXI) and the Miscellaneous Procedures chapter (XIX) have been merged into a new chapter: Non-invasive, cognitive and interventions not elsewhere classified (XIX). All references to the service provider in the existing allied health interventions have been removed and any duplication or overlap of interventions has been avoided by providing a generic code that can be used by all service providers. NAHCC professional association representatives were heavily involved in this revision which was completed over a very tight timeframe.

The revised Allied Health interventions are included in the IFI-PI Project report and will of course be available when the ICD-10-AM 2nd edition is released.

NAHCC has forward plans for the 3rd edition of ICD-10-AM, scheduled for publication in January 2002.

General enquiries regarding ICD-10-AM 2nd edition should be directed to Michelle Bramley, NCCH at the following address:

The University of Sydney  
Faculty of Health Sciences  
PO Box 170, Lidcombe NSW 1825  
Tel: (02) 9351-9461 Fax: (02) 9351-9603  
E-mail: m.bramley@cchs.usyd.edu.au

Order forms can be downloaded from the NCCH website: <http://www.cchs.usyd.edu.au/ncch/>

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### CURRENTLY RECEIVE TALKING CASEMIX?

If you are not on the Talking Casemix mailing list and would like to be, please contact us via fax, email or phone (details on page 1), and supply us with your Name, Position Title, Organisation, Address, Telephone, Fax and Email details.

## State / Territory Casemix Groups

		Telephone	Fax	E-mail
<b>ACT</b>	David Rhodes Canberra Hospital	02 6244 2625	02 6285 3020	david_rhodes@dpa.act.gov.au
<b>NSW</b>	Helen McCathie Concord Hospital	02 9767 6550	02 9767 8445	mccathieh@crgmail.crg.cs.nsw.gov.au
<b>NT</b>	Christine Carter Royal Darwin Hospital	08 8922 8866	08 8922 8900	chris.carter@casmoble.health.nt.gov.au
<b>QLD</b>	Mary Haire Prince Charles Hospital	07 3350 8443	07 3212 5147	hairem@health.qld.au
<b>SA</b>	Kate Roberts Hampstead Hospital	08 8222 1600	08 8222 1732	kroberts@hampstead.rah.sa.gov.au
<b>TAS</b>	Joyce Schuringa Royal Hobart Hospital	03 6222 8634	03 6222 8130	joyce.schuringa@dchs.tas.gov.au
<b>VIC</b>	Catherine Itsiopoulos Deakin University	03 9251 7266	03 9244 6017	ci@deakin.edu.au
<b>WA</b>	Bill Edward Royal Perth Hospital	08 9224 2050	08 9224 2050	billedwa@rph.health.wa.gov.au

## Professional Associations

		Telephone	Fax	E-mail
<b>HPCA</b>	Jenni Smith Donvale Private Hospital	03 9842 3566	03 9842 7276	donvale@meuesan.com.au
<b>Audiology</b>	Jan Pollard Royal Children's Hospital	03 9345 5550	03 9345 5514	pollardj@cryptic.rch.unimelb.edu.au
<b>Music Therapy</b>	Jeanette Kennelly Royal Children's Hospital Brisbane	07 3253 5340	07 3253 1978	kennellyj@health.qld.gov.au
<b>Psychology</b>	David Stokes Austin Repat Medical Centre	03 9496 2560	03 9496 2947	david.stokes@armc.org.au
<b>Physiotherapy</b>	Viv Wulfsohn Alfred Hospital	03 9276 3455	03 9276 2702	V.Wulfsohn@alfred.org.au
<b>Social Work</b>	Jill Feltham Royal Talbot Rehab Centre	03 9496 4591	03 9496 4589	Jill.FELTHAM@armc.org.au
<b>Occupational Therapy</b>	Gayle Smith	Please contact through NAHCC 03 9925 5934 03 9925 5960		karen.fitzgerald@rmit.edu.au
<b>Medical Photography</b>	Glenys Grant Royal Vic Eye & Ear Hospital	03 9929 8666	03 9663 7203	ggrant@rveeh.unimelb.edu.au
<b>Dietetics</b>	Annette Byron Royal Adelaide Hospital	08 8222 5223	08 8222 5135	abyron@nadmin.rah.sa.gov.au
<b>Hospital Pharmacy</b>	Naomi Burgess Royal Adelaide Hospital	08 8222 4951	08 8222 5881	nburgess@gp.rah.sa.gov.au
<b>Speech Pathology</b>	Paul Murray Austin Repat Medical Centre	03 9496 5000	03 9496 3280	paul.murray@armc.org.au
<b>Prosthetics &amp; Orthotics</b>	Joanne Pugh Royal Children's Hospital	03 9345 5870	03 9345 5106	orthotic@cryptic.rch.unimelb.edu.au
<b>Podiatry</b>	Allison Petchell Podiatry Council of Australia	03 9416 3111	03 9416 3188	alipet@hotmail.net.au
<b>Orthoptics</b>	Kerri Martin Royal Victorian Eye and Ear Hospital	03 9929 8448	03 9929 8420	kmartin@rveeh.vic.gov.au
<b>Exercise Physiology</b>	Phil Hamdorf Hampstead Rehab Hospital	08 8222 1889	08 8222 1850	phamdorf@hampstead.rah.sa.gov.au
<b>CDHAC</b>	Jo Murray	02 6289 7493	02 6289 7630	jo.murray@health.gov.au